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| APPLICATION NUMBER | FILING/RECEIPT DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|---------------------|-----------------------|------------------------|
| 09/780,987         | 02/09/2001          | Sun Ming Lieu         | 20004-000720US         |

CONFIRMATION NO. 2255

20350

TOWNSEND AND TOWNSEND AND CREW  
TWO EMBARCADERO CENTER  
EIGHTH FLOOR  
SAN FRANCISCO, CA 94111-3834

FORMALITIES LETTER



\*OC000000005870514\*

Date Mailed: 03/16/2001

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

*Filing Date Granted*

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.  
*Applicant must submit \$ 355 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).*
- Total additional claim fee(s) for this application is \$702.
  - \$342 for 38 total claims over 20.
  - \$360 for 9 independent claims over 3 .
- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 1122.

*A copy of this notice **MUST** be returned with the reply.*

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Initial Patent Examination Division (703) 308-1202

09/11/2001 GTEFFERA 00000021 201430 09780987

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PART 2 - COPY TO BE RETURNED WITH RESPONSE

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PTO/SB/21 (08-00)

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|  |                             |                               |                 |
|--|-----------------------------|-------------------------------|-----------------|
| <b>TRANSMITTAL FORM</b><br>SEP 10 2001<br>(to be used for all correspondence after initial filing) | <b>Application Number</b>   | 09/780,987                    |                 |
|  | <b>Filing Date</b>          | February 9, 2001              |                 |
|  | <b>First Named Inventor</b> | Lieu, Sun Ming                |                 |
|  | <b>Group Art Unit</b>       | 2165                          |                 |
|  | <b>Examiner Name</b>        | To Be Assigned                |                 |
| <b>Total Number of Pages in This Submission</b>  | 1                           | <b>Attorney Docket Number</b> | 020004-000720US |

| ENCLOSURES (check all that apply)  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><br><input type="checkbox"/> Fee Attached<br><br><input type="checkbox"/> Amendment / Response<br><br><input type="checkbox"/> After Final<br><br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input checked="" type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><br><input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><br><input type="checkbox"/> Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition<br><br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Two (2) Declarations;<br>Copy of Notice of Missing Parts;<br>Application Data Sheet;<br>Return Receipt Postcard |
| <b>Remarks</b>   |  | The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.   |
| Pursuant to the Notice to File Missing Parts of Non-Provisional Application dated March 16, 2001, the enclosures listed above are to be made of record in the above-identified case. The fees required are listed on the attached Fee Transmittal to be deducted from our Deposit Account listed above.  |  |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |
|--|---|
| <b>Firm and Individual name</b>            | Townsend and Townsend and Crew LLP<br>Sujit B. Kotwal<br>Reg No. 43,336 |
| <b>Signature</b>                           | S. B. Kotwal  |
| <b>Date</b>                                | September 6, 2001   |

| CERTIFICATE OF MAILING  |                           |
|---|---------------------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:<br>September 6, 2001 |                           |
| <b>Typed or printed name</b>  | Krista K. Merrimac        |
| <b>Signature</b>  | <i>Krista K. Merrimac</i> |
| <b>Date</b>   | September 6, 2001         |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.  
PA 3150073 v1

|   |  |  |  |
|---|--|--|--|
| <h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2001</h2> <p style="font-size: small; margin: 5px 0;">SEP 10 2001</p> <p style="font-size: x-small; margin: 0;">Patent fees are subject to annual revision.</p> |  | <b>Complete if Known</b>               |  |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) 1817  |  | Application Number<br>09/780,987       | Filing Date<br>February 9, 2001        |
|   |  | First Named Inventor<br>Lieu, Sun Ming | Examiner Name<br>To Be Assigned        |
|   |  | Group Art Unit<br>2165                 | Attorney Docket No.<br>020004-000720US |

| METHOD OF PAYMENT   | FEE CALCULATION (continued)  |                    |                 |  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
|---|--|--------------------|-----------------|--|-----------------|-----------------|----------|-----|-----|-----|--------------------|-------------------------------------|-----|-----|-----|-----|-------------------|---|-----|-----|-----|-----|------------------|---------------------------|-----|-----|-------|-----|--------------------|--|-----|-----|------|-----|------------------------|--|---------------------|-----|--------|-----|--------|---|--------------|--------------------|--------------------|--------------|----------------|--|----|-----|-----|------------|-----|---|--|-----|-----|----------|------|--|--|-----|-------|-----|-----|---|----------------|-----------------|----------------|-----------------|-----------------|--|-----|-----|-----|-----|------------------------|------------------|-----|-----|-----|-----|-----------------------------------|--|-----|-----|-----|-----|---------------------------------------|--------------------------|-----|-----|-------|-----|--|---|-----|-----|-----|-----|--|----------------------------------|---------------------|-----|-------|-----|-----|------------------------------------|--|-----|-------|-----|-----|--------------------------------|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|-----------------|--|-----|-----|-----|-----|-------------------------------|--|-----|----|-----|----|---|--|-----|-----|-----|-----|---|--|-----|----|-----|----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|---|--|---------------------|--|--|--|--|--|
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number: 20-1430</p> <p>Deposit Account Name: Townsend and Townsend and Crew LLP</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>2. <input type="checkbox"/> Payment Enclosed:</p> <p style="text-align: center;"> <input type="checkbox"/> Check    <input type="checkbox"/> Credit card    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other             </p>   | <p><b>3. ADDITIONAL FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td>65</td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>390</td><td>216</td><td>195</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>890</td><td>217</td><td>445</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,390</td><td>218</td><td>695</td><td>Extension for reply within fourth month</td><td>695</td></tr> <tr><td>128</td><td>1,890</td><td>228</td><td>945</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>310</td><td>219</td><td>155</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>310</td><td>220</td><td>155</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>270</td><td>221</td><td>135</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>141</td><td>1,240</td><td>241</td><td>620</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>142</td><td>1,240</td><td>242</td><td>620</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143</td><td>440</td><td>243</td><td>220</td><td>Design issue fee</td><td></td></tr> <tr><td>144</td><td>600</td><td>244</td><td>300</td><td>Plant issue fee</td><td></td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>146</td><td>710</td><td>246</td><td>355</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>149</td><td>710</td><td>249</td><td>355</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr> <tr><td>179</td><td>710</td><td>279</td><td>355</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr><td colspan="6">Other fee (specify)</td></tr> </tbody> </table> <p>The Commissioner is authorized to charge any additional fees to the above noted Deposit Account.</p> <p>*Reduced by Basic Filing Fee Paid    <b>SUBTOTAL (3)</b> (\$)760</p> | Large Fee Code     | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$) | Fee Description | Fee Paid | 105 | 130 | 205 | 65                 | Surcharge - late filing fee or oath | 65  | 127 | 50  | 227 | 25                | Surcharge - late provisional filing fee or cover sheet. |     | 139 | 130 | 139 | 130              | Non-English specification |     | 147 | 2,520 | 147 | 2,520              | For filing a request for reexamination |     | 112 | 920* | 112 | 920*                   | Requesting publication of SIR prior to Examiner action |                     | 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action |              | 115                | 110                | 215          | 55             | Extension for reply within first month |    | 116 | 390 | 216        | 195 | Extension for reply within second month |  | 117 | 890 | 217      | 445  | Extension for reply within third month |  | 118 | 1,390 | 218 | 695 | Extension for reply within fourth month | 695            | 128             | 1,890          | 228             | 945             | Extension for reply within fifth month |     | 119 | 310 | 219 | 155                    | Notice of Appeal |     | 120 | 310 | 220 | 155                               | Filing a brief in support of an appeal |     | 121 | 270 | 221 | 135                                   | Request for oral hearing |     | 138 | 1,510 | 138 | 1,510  | Petition to institute a public use proceeding |     | 140 | 110 | 240 | 55   | Petition to revive - unavoidable |                     | 141 | 1,240 | 241 | 620 | Petition to revive - unintentional |  | 142 | 1,240 | 242 | 620 | Utility issue fee (or reissue) |  | 143 | 440 | 243 | 220 | Design issue fee |  | 144 | 600 | 244 | 300 | Plant issue fee |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | 123 | 50 | Petitions related to provisional applications |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) |  | 146 | 710 | 246 | 355 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 149 | 710 | 249 | 355 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 179 | 710 | 279 | 355 | Request for Continued Examination (RCE) |  | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |  | Other fee (specify) |  |  |  |  |  |
| Large Fee Code  | Entity Fee (\$)  | Small Fee Code     | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 105   | 130  | 205                | 65              | Surcharge - late filing fee or oath  | 65              |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 127   | 50   | 227                | 25              | Surcharge - late provisional filing fee or cover sheet.                    |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 139   | 130  | 139                | 130             | Non-English specification  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 147   | 2,520  | 147                | 2,520           | For filing a request for reexamination                                     |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 112   | 920*   | 112                | 920*            | Requesting publication of SIR prior to Examiner action                     |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 113   | 1,840*   | 113                | 1,840*          | Requesting publication of SIR after Examiner action                        |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 115   | 110  | 215                | 55              | Extension for reply within first month                                     |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 116   | 390  | 216                | 195             | Extension for reply within second month                                    |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 117   | 890  | 217                | 445             | Extension for reply within third month                                     |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 118   | 1,390  | 218                | 695             | Extension for reply within fourth month                                    | 695             |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 128   | 1,890  | 228                | 945             | Extension for reply within fifth month                                     |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 119   | 310  | 219                | 155             | Notice of Appeal   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 120   | 310  | 220                | 155             | Filing a brief in support of an appeal                                     |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 121   | 270  | 221                | 135             | Request for oral hearing   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 138   | 1,510  | 138                | 1,510           | Petition to institute a public use proceeding                              |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 140   | 110  | 240                | 55              | Petition to revive - unavoidable   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 141   | 1,240  | 241                | 620             | Petition to revive - unintentional   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 142   | 1,240  | 242                | 620             | Utility issue fee (or reissue)   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 143   | 440  | 243                | 220             | Design issue fee   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 144   | 600  | 244                | 300             | Plant issue fee  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 122   | 130  | 122                | 130             | Petitions to the Commissioner  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 123   | 50   | 123                | 50              | Petitions related to provisional applications                              |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 126   | 180  | 126                | 180             | Submission of Information Disclosure Stmt                                  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 581   | 40   | 581                | 40              | Recording each patent assignment per property (times number of properties) |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 146   | 710  | 246                | 355             | Filing a submission after final rejection (37 CFR § 1.129(a))              |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 149   | 710  | 249                | 355             | For each additional invention to be examined (37 CFR § 1.129(b))           |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 179   | 710  | 279                | 355             | Request for Continued Examination (RCE)                                    |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 169   | 900  | 169                | 900             | Request for expedited examination of a design application                  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| Other fee (specify)   |  |                    |                 |  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| <p><b>1. BASIC FILING FEE</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>710</td><td>201</td><td>355</td><td>Utility filing fee</td><td>355</td></tr> <tr><td>106</td><td>320</td><td>206</td><td>160</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>490</td><td>207</td><td>245</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>710</td><td>208</td><td>355</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>150</td><td>214</td><td>75</td><td>Provisional filing fee</td><td></td></tr> <tr><td colspan="5"><b>SUBTOTAL (1)</b></td><td>(\$)355</td></tr> </tbody> </table> <p><b>2. EXTRA CLAIM FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>Independent Claims</th> <th>Multiple Dependent</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>58</td> <td>12</td> <td></td> <td>-20** = 38</td> <td>\$9</td> <td>\$342</td> </tr> <tr> <td></td> <td></td> <td></td> <td>-3** = 9</td> <td>\$40</td> <td>\$360</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>80</td><td>202</td><td>40</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>270</td><td>204</td><td>135</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>109</td><td>80</td><td>209</td><td>40</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr><td colspan="5"><b>SUBTOTAL (2)</b></td><td>(\$)702</td></tr> </tbody> </table> <p>**or number previously paid, if greater; For Reissues, see above</p> | Large Fee Code   | Entity Fee (\$)    | Small Fee Code  | Entity Fee (\$)  | Fee Description | Fee Paid        | 101      | 710 | 201 | 355 | Utility filing fee | 355                                 | 106 | 320 | 206 | 160 | Design filing fee |   | 107 | 490 | 207 | 245 | Plant filing fee |                           | 108 | 710 | 208   | 355 | Reissue filing fee |  | 114 | 150 | 214  | 75  | Provisional filing fee |  | <b>SUBTOTAL (1)</b> |     |        |     |        | (\$)355   | Total Claims | Independent Claims | Multiple Dependent | Extra Claims | Fee from below | Fee Paid                               | 58 | 12  |     | -20** = 38 | \$9 | \$342                                   |  |     |     | -3** = 9 | \$40 | \$360                                  |  |     |       |     |     |   | Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid                               | 103 | 18  | 203 | 9   | Claims in excess of 20 |                  | 102 | 80  | 202 | 40  | Independent claims in excess of 3 |  | 104 | 270 | 204 | 135 | Multiple dependent claim, if not paid |                          | 109 | 80  | 209   | 40  | ** Reissue independent claims over original patent |   | 110 | 18  | 210 | 9   | ** Reissue claims in excess of 20 and over original patent |                                  | <b>SUBTOTAL (2)</b> |     |       |     |     | (\$)702                            |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| Large Fee Code  | Entity Fee (\$)  | Small Fee Code     | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 101   | 710  | 201                | 355             | Utility filing fee   | 355             |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 106   | 320  | 206                | 160             | Design filing fee  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 107   | 490  | 207                | 245             | Plant filing fee   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 108   | 710  | 208                | 355             | Reissue filing fee   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 114   | 150  | 214                | 75              | Provisional filing fee   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| <b>SUBTOTAL (1)</b>   |  |                    |                 |  | (\$)355         |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| Total Claims  | Independent Claims   | Multiple Dependent | Extra Claims    | Fee from below   | Fee Paid        |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 58  | 12   |                    | -20** = 38      | \$9  | \$342           |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
|   |  |                    | -3** = 9        | \$40   | \$360           |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
|   |  |                    |                 |  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| Large Fee Code  | Entity Fee (\$)  | Small Fee Code     | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 103   | 18   | 203                | 9               | Claims in excess of 20   |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 102   | 80   | 202                | 40              | Independent claims in excess of 3  |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 104   | 270  | 204                | 135             | Multiple dependent claim, if not paid                                      |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 109   | 80   | 209                | 40              | ** Reissue independent claims over original patent                         |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| 110   | 18   | 210                | 9               | ** Reissue claims in excess of 20 and over original patent                 |                 |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |
| <b>SUBTOTAL (2)</b>   |  |                    |                 |  | (\$)702         |                 |          |     |     |     |                    |                                     |     |     |     |     |                   |   |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |   |              |                    |                    |              |                |  |    |     |     |            |     |   |  |     |     |          |      |  |  |     |       |     |     |   |                |                 |                |                 |                 |  |     |     |     |     |                        |                  |     |     |     |     |                                   |  |     |     |     |     |                                       |                          |     |     |       |     |  |   |     |     |     |     |  |                                  |                     |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                     |  |  |  |  |  |

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|                   |                 | Date                              | September 6, 2001 |

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